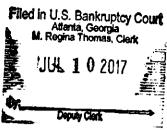
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| Fill in this information to identify your case: | | | | | | |
|--|------------------------|------------------------|---------------------|--|--|--|
| Debtor 1 | Leteisha First Name | Fastina Middle Name | Jacobs Last Name | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | |
| United States Bankruptcy Court for the: NORTHERN DISTRICT OF GEORGIA | | | | | | |
| Case number (if known) | 17-61608 | | | | | |



Check if this is an amended filing

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Give Details About Your Marital Status and Where You Lived Before

| 1. | What is your current marital status? ☐ Married Not married |
|----|--|
| 2. | During the last 3 years, have you lived anywhere other than where you live now? No Yes. List all of the places you lived in the last 3 years. Do not include where you live now. |
| 3. | Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.) |
| | No Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). |

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| Debtor 1 Leteisha Fastina Jacobs | | Leteisha Fastina Jacobs | Case num | | mber (if known) <u>17-61608</u> | | | |
|----------------------------------|---|--|--|--|--|--|--|--|
| P | art 2: | Explain the Sources of | our Income | | | · · · · · · · · · · · · · · · · · · · | | |
| 4. | 4. Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. | | | | | | | |
| | ☐ No ☑ Yes | . Fill in the details. | | | | | | |
| | | | Debtor 1 | | Debtor 2 | | | |
| | | | Sources of income Check all that apply. | Gross income (before deductions and exclusions | Sources of income Check all that apply. | Gross income (before deductions and exclusions | | |
| | | ry 1 of the current year until filed for bankruptcy: | ✓ Wages, commissions, bonuses, tips✓ Operating a business | \$28,037.33 | Wages, commissions, bonuses, tips☐ Operating a business | | | |
| | | calendar year: December 31, 2016) | Wages, commissions, bonuses, tips ☐ Operating a business | \$56,000.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | |
| | | ndar year before that: December 31, 2015 | ✓ Wages, commissions, bonuses, tips☐ Operating a business | \$56,000.00 | ☐ Wages, commissions, bonuses, tips☐ Operating a business | | | |
| 5. | 5. Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security; unemployment; and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are in a joint case and you have income that you received together, list it only once under Debtor 1. | | | | | | | |
| | No No | h source and the gross income fro | om each source separately. [| Oo not include income | that you listed in line 4. | | | |

| Det | btor 1 | Leteisha Fastina Jacobs Case number (if known) 17-61608 | | | | | | |
|---|---|---|--|--|--|--|--|--|
| Б | art 3: | List Certain Payments You Made Before You Filed for Bankruptcy | | | | | | |
| 6. | Are eith | er Debtor 1's or Debtor 2's debts primarily consumer debts? | | | | | | |
| | □ No. | Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." | | | | | | |
| | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more? | | | | | | | |
| | | □ No. Go to line 7. | | | | | | |
| | | Yes. List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | |
| | | * Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. | | | | | | |
| | ✓ Yes. | Debtor 1 or Debtor 2 or both have primarily consumer debts. | | | | | | |
| | During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? | | | | | | | |
| | | No. Go to line 7. | | | | | | |
| | | Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. | | | | | | |
| 7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligation such as child support and alimony. | | | | | | | | |
| | ✓ No ☐ Yes | List all payments to an insider. | | | | | | |
| 8. | | year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that d an insider? | | | | | | |
| | | payments on debts guaranteed or cosigned by an insider. | | | | | | |
| | ⊠ No ☐ Yes. | . List all payments that benefited an insider. | | | | | | |

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| Deb | tor 1 | Leteisha Fastina Jacobs | Case number (if known)17-61608 |
|-----|---------------|--|---|
| P | art 4: | Identify Legal Actions, Repossessions, and Foreclosure | es |
| 9. | List all s | 1 year before you filed for bankruptcy, were you a party in any lawsuit, such matters, including personal injury cases, small claims actions, divorce ations, and contract disputes. | |
| | ☑ No ☐ Yes | s. Fill in the details. | |
| 10. | seized, | 1 year before you filed for bankruptcy, was any of your property reposition or levied? all that apply and fill in the details below. | sessed, foreclosed, garnished, attached, |
| | - | Go to line 11. 5. Fill in the information below. | |
| 11. | | 90 days before you filed for bankruptcy, did any creditor, including a bast from your accounts or refuse to make a payment because you owed | · · · · · · · · · · · · · · · · · · · |
| | ☑ No ☐ Yes | s. Fill in the details. | |
| 12. | | 1 year before you filed for bankruptcy, was any of your property in the rs, a court-appointed receiver, a custodian, or another official? | possession of an assignee for the benefit of |
| | ☑ No ☐ Yes | • | |
| P | art 5: | List Certain Gifts and Contributions | |
| 13. | Within | 2 years before you filed for bankruptcy, did you give any gifts with a to | tal value of more than \$600 per person? |
| | ✓ No Yes | s. Fill in the details for each gift. | |
| 14. | | 2 years before you filed for bankruptcy, did you give any gifts or contri charity? | butions with a total value of more than \$600 |
| | ☑ No ☐ Yes | s. Fill in the details for each gift or contribution. | |
| P | art 6:⊹ | List Certain Losses | |
| 15. | | 1 year before you filed for bankruptcy or since you filed for bankruptcy isaster, or gambling? | , did you lose anything because of theft, fire, |
| | No ☐ Yes | s. Fill in the details. | |

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| 16. Within 1 y anyone y Include an | ear before you consulted by attorneys, the fill in the det | rou fii I abo bankr | led for bankr ut seeking b | r Transfers uptcy, did you or anyone else acting on your ankruptcy or preparing a bankruptcy petition preparers, or credit counseling agencies for se | | or transfer any pro | perty to |
|--|---|----------------------------------|---------------------------------------|--|----------------|--|----------------------------|
| anyone yo Include ar No | ou consulted by attorneys, by Fill in the det | d abo bankr | ut seeking b | ankruptcy or preparing a bankruptcy petition | | or transfer any pro | perty to |
| ⊻ tes. | | alis. | | | rvices require | d for your bankrupte | су. |
| Charles M. L. Person Who Was 5060 Memori Number Street | Paid al Drive | | · · · · · · · · · · · · · · · · · · · | Description and value of any property tra Payment for Bankruptcy Petition Pre | | Date payment or transfer was made 07/03/2017 | Amount of payment \$249.00 |
| Stone Mount City www.249bar Email or website a | s kruptcy.co | SA tate om | 30083 ZIP Code | | | | |
| CC Advising Person Who Was 703 Washing Number Street | Paid | if Not | You | Description and value of any property tra- Payment for Credit Counseling Briefi | | Date payment or transfer was made 07/03/2017 | Amount of payment \$9.76 |
| Say City ity www.ccadvi mail or website a | S sing.com ddress | /i) tate | 48708 ZIP Code | | | | |
| United States Person Who Mad Person Who Was 75 Ted Turne Number Street | s Bankrupt Paid er Dr. SW | cy C | ourt | Description and value of any property tra Payment of Filing Fee | insferred | Date payment or transfer was made 07/03/2017 | Amount of payment \$80.00 |
| Atlanta City www.ganb.u Email or website a | scourts.go | ≩A itate v | 30303 ZIP Code | _ | | | |

| Debtor 1 | | Leteisha Fastina Jacobs | Case number (if known) <u>17-61608</u> |
|----------|---------------|--|--|
| 17. | anyone | year before you filed for bankruptcy, did you or anyone else acting or who promised to help you deal with your creditors or to make paymen | |
| | Do not i | nclude any payment or transfer that you listed on line 16. | |
| | ✓ No Yes | . Fill in the details. | |
| 18. | | 2 years before you filed for bankruptcy, did you sell, trade, or otherwise y transferred in the ordinary course of your business or financial affair | |
| | | both outright transfers and transfers made as security (such as granting of a neclude gifts and transfers that you have already listed on this statement. | a security interest or mortgage on your property). |
| | ✓ No ☐ Yes | s. Fill in the details. | |
| 19. | | 10 years before you filed for bankruptcy, did you transfer any property a beneficiary? (These are often called asset-protection devices.) | to a self-settled trust or similar device of which |
| | ☑ No ☐ Yes | . Fill in the details. | |
| Ē | art 8: | List Certain Financial Accounts, Instruments, Safe Depo | osit Boxes, and Storage Units |
| 20. | | l year before you filed for bankruptcy, were any financial accounts or i closed, sold, moved, or transferred? | instruments held in your name, or for your |
| | | checking, savings, money market, or other financial accounts; certificates of pension funds, cooperatives, associations, and other financial institutions. | · · · · · · · · · · · · · · · · · · · |
| | ☑ No ☐ Yes | Fill in the details. | |
| 21. | - | now have, or did you have within 1 year before you filed for bankruptc urities, cash, or other valuables? | cy, any safe deposit box or other depository |
| | ✓ No Yes | . Fill in the details. | |
| 22. | Have yo | ou stored property in a storage unit or place other than your home with | nin 1 year before you filed for bankruptcy? |
| | M No ☐ Yes | Fill in the details. | |
| P | art 9. | Identify Property You Hold or Control for Someone Else | |
| 23. | | hold or control any property that someone else owns? Include any proin trust for someone. | roperty you borrowed from, are storing for, |
| | ☑ No ☐ Yes | . Fill in the details. | |

| Deb | otor 1 | Leteisha Fa | istina Jacobs | 3 | | Case number (if known) 17-61608 | | |
|---------|--|---|---|---|-------------------------|--|--|--|
| Þ | art 10: | Give Deta | ails About E | nvironmental Info | rmation | | | |
| For | the purp | ose of Part 1 | 0, the followin | g definitions apply: | • | | | |
| | Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substance, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. | | | | | | | |
| | | · . | - | property as defined un utilize it, including disp | | ntal law, whether you now own, operate, or | | |
| | Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contâminant, or similar item. | | | | | | | |
| Rep | oort all n | otices, releas | es, and proce | edings that you know a | bout, regardless of | when they occurred. | | |
| 24. | 4. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? | | | | | | | |
| | M No □ Yes | s. Fill in the de | etails. | | | | | |
| 25. | Have you notified any governmental unit of any release of hazardous material? ✓ No ✓ Yes. Fill in the details. | | | | | | | |
| 26. | Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. | | | | | | | |
| | ☑ No ☐ Yes | s. Fill in the de | etails. | | | | | |
| P | art 11: | Give Det | ails About Y | our Business or C | onnections to A | ny Business | | |
| 27. | Within busines | • | e you filed for | bankruptcy, did you ov | vn a business or ha | ve any of the following connections to any | | |
| | | A member o A partner in An officer, d | f a limited liabil a partnership irector, or mana | ployed in a trade, profes ity company (LLC) or lim aging executive of a corp the voting or equity secu | ited liability partners | | | |
| | _ | | above applies. at apply above | Go to Part 12. and fill in the details be | low for each busines. | s. | | |
| | | rucking, LL | .c | Describe the nature Trucking | e of the business | Employer Identification number Do not include Social Security number or ITIN. | | |
| | iness Nam | | | | | EIN: 4 7 - 1 3 0 7 0 3 2 | | |
| | ber Str | Springs Ct. eet | | Name of accountary | t or bookkeeper | Dates business existed | | |
| <u></u> | | | | _ | | From 07/10/2014 To present | | |
| De: | catur | GA Sta | 30034 E ZIP Code | | | | | |

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| Debtor 1 | Leteisha Fastina Jacobs | Case number (if known) | 17-61608 | | | | | | |
|-------------------------------------|--|---|--|--|--|--|--|--|--|
| | Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. | | | | | | | | |
| □ <i>y</i> ⊠ <i>v</i> | No Yes. Fill in the details below. | | | | | | | | |
| Part 12 | 2 Sign Below | | | | | | | | |
| that answ property l or both. | have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, por both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. X Leteisha Fastina Jacobs, Debtor 1 X Signature of Debtor 2 | | | | | | | | |
| | 07/06/2017 ttach additional pages to Your Statement of i | Date Financial Affairs for Individuals Filing for Bankruptcy | (Official Form 187)? | | | | | | |
| No No Yes | tadon additional pages to 1007 statement of | | (C.1.01.1.1.1.1.1) | | | | | | |
| Did you p | Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms? | | | | | | | | |
| Ď No | | | | | | | | | |
| Yes. | Name of person Charles M. Langevin, Jr. | | uptcy Petition Preparer's Notice, Signature (Official Form 119). | | | | | | |

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| Fill in this in | formation to iden | tify your ca | se and this filing: | | |
|---|--|---|---|---|---|
| Debtor 1 | Leteisha | Fastina | Jacobs | | |
| | First Name | Middle Name | Last Name | | |
| Debtor 2 | A First Name | N. 201 - A1 | 1 4 \$1 | | |
| (Spouse, if filing |) First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court for the | NORTHERN | I DISTRICT OF GEORGIA | | |
| Case number (if known) | <u>17-61608</u> | | | ☐ Check | if this is an |
| (# KIIOWII) | | , | | amend | ed filing |
| Official Forn | n 106A/B | | | | |
| | ./B: Property | | | | 12/15 |
| the asset in the confiling together, by sheet to this form Part 1: Do 1. Do you own No. Go | category where you the oth are equally respondent. On the top of any a escribe Each Resident or have any legal or to Part 2. | nink it fits best nsible for sup idditional page dence, Buil | List an asset only once. If an a Be as complete and accurate a olying correct information. If moes, write your name and case nut ding, Land, or Other Real E est in any residence, building, la | s possible. If two married pe re space is needed, attach a s mber (if known). Answer eve Estate You Own or Have | ople are separate ry question. |
| Yes. W | /here is the property? | | | | |
| 1.1. 2458 Wild Sprin Street address, if ava Decatur City | ngs Ct. illable, or other description GA 30034 State ZIP Cod | Check Sir Du Co Ma e | s the property? all that apply. agle-family home plex or multi-unit building andominium or cooperative anufactured or mobile home and restment property meshare | Do not deduct secured clair amount of any secured clair Creditors Who Have Claim. Current value of the entire property? \$125,800.00 Describe the nature of your interest (such as fee simple) | ms on Schedule D: s Secured by Property. Current value of the portion you own? \$125,800.00 |
| DeKalb County | | | her | entireties, or a life estate) | - · |
| County | | | as an interest in the property? | Fee Simple | |
| | | De | one. bbtor 1 only bbtor 2 only bbtor 1 and Debtor 2 only least one of the debtors and anoth | Check if this is comm (see instructions) | unity property |
| | | | information you wish to add aborty identification number: | ut this item, such as local | _ |
| | | • | all of your entries from Part 1, in Write that number here | | \$125,800.00 |
| Part 2: De | escribe Your Vehi | cles | | | |
| | | | st in any vehicles, whether they a tle, also report it on Schedule G: Ex | | · • |
| 3. Cars, vans, | trucks, tractors, spor | t utility vehicle | es, motorcycles | | |
| ∏ No ☑ Yes | | | | | |

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Gran Com

| Debi | tor 1 <u>Leteish</u> | a Fastina Jacobs | Cas | e number (if known) 17-6 | 31608 |
|--------------------|--|---|--|--|---|
| 3.1. Mak Mod | | International Prostar | Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only | Do not deduct secured cla amount of any secured cla Creditors Who Have Clain Current value of the | |
| Year | г: | 2011 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| App | roximate mileage: | 726,000 | At least one of the debtors and another | \$7,000.00 | \$7,000.00 |
| Othe | er information: | | _ | | 41140000 |
| | 1 International I 000 miles) | Prostar (approx. | Check if this is community property (see instructions) | | |
| 3.2. Mak | | Lincoln | Who has an interest in the property? Check one. | amount of any secured cla | |
| Mod | iel: | Navigator | Debtor 1 only | Creditors Who Have Clain | ns Secured by Property. |
| Year | r: | 2001 | Debtor 2 only | Current value of the | Current value of the |
| Aopi | roximate mileage: | 250.000 | Debtor 1 and Debtor 2 only | entire property? | portion you own? |
| | er information: | | At least one of the debtors and another | \$2,500.00 | \$2,500.00 |
| 200 | 11 Lincoln Navig 1000 miles) | ator (approx. | Check if this is community property (see instructions) | | |
| 3.3. Mak | | Saab | Who has an interest in the property? Check one. | amount of any secured cla | |
| Mod | lel; | 9-3 | Debtor 1 only | Creditors Who Have Clain | , , , |
| Yea | r: | 2001 | Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| App | roximate mileage: | | At least one of the debtors and another | \$1,500.00 | \$1,500.00 |
| | er information: 1 Saab 9-3 | | Check if this is community property (see instructions) | | |
| 3.4. Mak | e: | International | Who has an interest in the property? Check one. | Do not deduct secured cla amount of any secured cla Creditors Who Have Clain | |
| Mod | lel: | Box Truck | Debtor 1 only | | • • • |
| Year | r: | 2001 | Debtor 2 only Debtor 1 and Debtor 2 only | Current value of the entire property? | Current value of the portion you own? |
| Аррі | roximate mileage: | 268,000 | At least one of the debtors and another | \$2,000.00 | \$2,000.00 |
| 200 | er information: 1 International ! 000 miles) | Box Truck (approx. | Check if this is community property (see instructions) | | |
| 4. | Watercraft, aircr | • | and other recreational vehicles, other veh al watercraft, fishing vessels, snowmobiles, m | • | |
| 5. | | | own for all of your entries from Part 2, inclu Part 2. Write that number here | _ | \$13,000.00 |
| Pa | art 3: Desci | ibe Your Personal | and Household Items | <u> </u> | |
| Doy | you own or have : | any legal or equitable in | nterest in any of the following items? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 6. | - | ls and furnishings appliances, furniture, line | ens, china, kitchenware | | |
| | ☐ No ☑ Yes. Describ | e Household good | ds | | \$1,500.00 |

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| Deb | tor 1 <u>1</u> | Leteisha Fastina Jacobs Case | e number (if known) _ | 17-61608 |
|------|---------------------|--|--------------------------|---|
| 7. | Electron Example | ics s: Televisions and radios; audio, video, stereo, and digital equipment; compute music collections; electronic devices including cell phones, cameras, media | | |
| | □ No ☑ Yes. | Describe Electronics | | \$250.00 |
| 8. | | bles of value s: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or stamp, coin, or baseball card collections; other collections, memorabilia, collections | | |
| | No Yes. | Describe | | |
| 9, | | ent for sports and hobbies s: Sports, photographic, exercise, and other hobby equipment; bicycles, pool ta canoes and kayaks; carpentry tools; musical instruments | ables, golf clubs, skis; | |
| | ✓ No ☐ Yes. | Describe | | |
| 10. | | s s: Pistols, rifles, shotguns, ammunition, and related equipment | | |
| | ☑ No ☐ Yes. | Describe | | |
| 11. | • | s: Everyday clothes, furs, leather coats, designer wear, shoes, accessories | | |
| | ☐ No ✓ Yes. | Describe Clothing | | \$50.00 |
| 12. | Jewelry Example | s: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloo gold, silver | om jewelry, watches, g | ems, |
| | □ No ▼ Yes. | Describe Jewelry | | \$20.00 |
| 13. | Example | n animals s: Dogs, cats, birds, horses | | |
| | ☑ No ☐ Yes. | Describe | | |
| 14, | Any other | er personal and household items you did not already fist, including any hea ist | alth aids you | |
| | | Give specific mation | | |
| 15. | | dollar value of all of your entries from Part 3, including any entries for page I for Part 3. Write the number here | | \$1,820.00 |
| Pã | irt 4. | Describe Your Financial Assets | · | |
| Do y | rou own (| or have any legal or equitable interest in any of the following? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 16. | Cash Example | s: Money you have in your wallet, in your home, in a safe deposit box, and on h petition | nand when you file you | ir |
| | ☑ No ☐ Yes | | Cash: | |

Official Form 106A/B

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| Deb | tor 1 Leteisha Fastina Jacobs | | Case number (if known) 17-61608 | | | | | |
|-----|---|---|--|----------|--|--|--|--|
| 17. | Deposits Examples | : Checking, savings, or o | ther financial accounts; certificates of deposit; shares in credit unions, other similar institutions. If you have multiple accounts with the same | | | | | |
| | □ No | | | | | | | |
| | | *************************************** | Institution name: | | | | | |
| | 17.1. | Checking account: | Checking account with Delta Community Credit Union | \$100.00 | | | | |
| | 17.2. | Checking account: | Checking account with Chase Bank | \$573.00 | | | | |
| | 17.3. | Savings account: | Savings account with Delta Community Credit Union | \$15.00 | | | | |
| | 17.4. | Savings account: | Savings account with Chase Bank | \$0.34 | | | | |
| 18. | Examples No | utual funds, or publicly Bond funds, investment | t accounts with brokerage firms, money market accounts | | | | | |
| 19. | an interes | st in an LLC, partnership | terests in incorporated and unincorporated businesses, including o, and joint venture | | | | | |
| | Yes. Give specific information about them | | | | | | | |
| 20. | Negotiable Non-negotiable Non-negotiable | e instruments include per | s and other negotiable and non-negotiable instruments sonal checks, cashiers' checks, promissory notes, and money orders, se you cannot transfer to someone by signing or delivering them. | | | | | |
| | inform | nation about | name: | | | | | |
| 21, | | nt or pension accounts Interests in IRA, ERISA profit-sharing plans | , Keogh, 401(k), 403(b), thrift savings accounts, or other pension or | | | | | |
| | | List each nt separately. Type of a | account: Institution name: | | | | | |
| 22. | Your share Examples: | | nts ou have made so that you may continue service or use from a company rds, prepaid rent, public utilities (electric, gas, water), telecommunications | | | | | |
| | No No | | Institution name or individual: | | | | | |
| 23. | _ | (A contract for a specific | c periodic payment of money to you, either for life or for a number of years) | | | | | |
| | ☑ No | Issuer | | | | | | |
| 24. | | in an education IRA, in a §§ 530(b)(1), 529A(b), ar | an account in a qualified ABLE program, or under a qualified state tuition program. ad 529(b)(1). | | | | | |
| | ✓ No Yes | Institut | ion name and description. Separately file the records of any interests. 11 U.S.C. § 521(c) | ı | | | | |
| 25. | | quitable or future interes xercisable for your bene | ets in property (other than anything listed in line 1), and rights or efit | | | | | |
| | | Give specific ation about them | - | | | | | |

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| Deb | tor 1 | Leteisha Fastina Jacobs | Case number (if known)17= | 61608 |
|-----|------------------|--|------------------------------------|---|
| 26. | Example No Yes | , copyrights, trademarks, trade secrets, and other intellectual property es: Internet domain names, websites, proceeds from royalties and licensing . Give specific rmation about them | | |
| 27. | | es, franchises, and other general intangibles es: Building permits, exclusive licenses, cooperative association holdings, | liquor licenses, professional lice | enses |
| | | . Give specific mation about them | | |
| Moi | ney or pr | operty owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| 28. | Tax ref | inds owed to you | | |
| | abo you | . Give specific information ut them, including whether already filed the returns the tax years | Feder State Local | |
| 29. | Family Exampl | súpport es: Past due or lump sum alimony, spousal support, child support, mainter | nance, divorce settlement, prope | rty settlement |
| | ✓ No ☐ Yes | . Give specific information | Alimony: | |
| | | | Maintenance: | |
| | | | Support: | |
| | | | Divorce settlemen | nt: |
| | | | Property settleme | nt: |
| 30. | Exampl | mounts someone owes you es: Unpaid wages, disability insurance payments, disability benefits, sick p compensation, Social Security benefits; unpaid loans you made to sor . Give specific information | | |
| 31. | Interes | s in insurance policies | | |
| | No Yes | es: Health, disability, or life insurance; health savings account (HSA); cred Name the insurance npany of each policy list its value | | rance Surrender or refund value: |
| 32. | If you a | erest in property that is due you from someone who has died re the beneficiary of a living trust, expect proceeds from a life insurance po to receive property because someone has died | olicy, or are currently | |
| | ☑ No □ Yes | s. Give specific information | | |
| 33. | | against third parties, whether or not you have filed a lawsuit or made es: Accidents, employment disputes, insurance claims, or rights to sue | a demand for payment | |
| | ☑ No ☐ Yes | . Describe each claim | | |

Official Form 106A/B

Schedule A/B: Property

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| Deb | tor 1 | Leteisha Fastina Jacobs Case number (if known | ń) <u>17-616</u> | 08 |
|-------------|--|---|-------------------------|--|
| 34. | rights to | ontingent and unliquidated claims of every nature, including counterclaims of the debtor and a set off claims | d | |
| | ☑ No ☐ Yes | . Describe each claim | _ | |
| 35. | Any fina | ancial assets you did not already list | | |
| | Mo □ Yes | . Give specific information | | |
| 36. | | dollar value of all of your entries from Part 4, including any entries for pages you have d for Part 4. Write that number here | → | \$688.34 |
| Pa | art 5: | Describe Any Business-Related Property You Own or Have an Interest In. L | _ist any re | al estate in Part 1. |
| 37. | Do you | own or have any legal or equitable interest in any business-related property? | | |
| | <u>. </u> | Go to Part 6. . Go to line 38. | | |
| | _ | | С | urrent value of the |
| | | | Ď | ortion you own? o not deduct secured alms or exemptions. |
| 38. | Accoun | ts receivable or commissions you already earned | | |
| | ✓ No ☐ Yes | . Describe | <u>-</u> | |
| 39. | | quipment, furnishings, and supplies as: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephologists, chairs, electronic devices | nes, | |
| | No No Yes | . Describe | _ | |
| 4 0. | Machine | ery, fixtures, equipment, supplies you use in business, and tools of your trade | | |
| | Mo No Yes | . Describe. | | |
| 41. | Invento | ry | | |
| | Mo ☐ Yes | . Describe | - | · <u></u> |
| 42. | Interest | s In partnerships or joint ventures | | |
| | ✓ No ☐ Yes | . Describe Name of entity: % of own | iership: | |
| 43. | Custom | er lists, mailing lists, or other compilations | | |
| | Mo No Yes | . Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A) No Yes. Describe | i)? — | |
| 44, | Any bus | siness-related property you did not already list | | |
| | ☑ No ☐ Yes | . Give specific information. | | |
| 45. | | dollar value of all of your entries from Part 5, including any entries for pages you have d for Part 5. Write that number here | | \$0.00 |

Official Form 106A/B

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| Debtor 1 | | Leteisha Fastina Jacobs | Case number (if known) 17-61608 | | |
|----------|---------------|--|---------------------------------|---|--|
| P | | Describe Any Farm- and Commercial Fishing-Related Prop If you own or have an interest in farmland, list it in Part 1. | perty You Own or Have a | ın Interest In. | |
| 46. | Do you | own or have any legal or equitable interest in any farm- or commercial t | fishing-related property? | | |
| | الستنبا | . Go to Part 7. s. Go to line 47. | | | |
| | | | | Current value of the portion you own? Do not deduct secured claims or exemptions. | |
| 47. | Farm al | i nimals les: Livestock, poultry, farm-raised fish | | | |
| | No Yes | | | | |
| 48. | Crops- | either growing or harvested | | | |
| | | s. Give specific | | | |
| 49. | Farm a | and fishing equipment, implements, machinery, fixtures, and tools of trad | de | | |
| | ☑ No ☐ Yes | | | | |
| 50. | Fạrm ạ | and fishing supplies, chemicals, and feed | | | |
| | ✓ No ☐ Yes | | | | |
| 51. | Any far | rm- and commercial fishing-related property you did not already list | | | |
| | | s. Give specific | | | |
| 52. | | e dollar value of all of your entries from Part 6, including any entries for ed for Part 6. Write that number here | _ | \$0.00 | |
| ₽ | art 7: | Describe All Property You Own or Have an Interest in That | t You Did Not List Above |) | |
| 53. | - | have other property of any kind you did not already list? les: Season tickets, country club membership | | | |
| | ☑ No ☐ Yes | s. Give specific information. | | | |
| 54. | Add th | e dollar value of all of your entries from Part 7. Write that number here | → | \$0.00 | |

Official Form 106A/B Schedule A/B: Property page 7

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| Debtor 1 | Leteisha Fastina Jacobs | Case num | ber (if known)17-61608 | |
|------------|--|--|--------------------------------|--------------|
| Part 8: | List the Totals of Each Part of this Form | ···· | | |
| 55. Part | 1: Total real estate, line 2 | | | \$125,800.00 |
| 56. Part 2 | 2: Total vehicles, line 5 | \$13,000.00 | | |
| 57. Part : | 3: Total personal and household items, line 15 | \$1,820.00 | | |
| 58. Part 4 | 4: Total financial assets, line 36 | \$688.34 | | |
| 59. Part | 5: Total business-related property, line 45 | \$0.00 | | |
| 60. Part (| 6: Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. Part 7 | 7: Total other property not listed, line 54 | +\$0.00 | | |
| 62. Total | personal property. Add lines 56 through 61 | \$45 500 04 | Copy personal property total + | \$15,508.34 |
| 63. Total | of all property on Schedule A/B. Add line 55 + line 62 | ······································ | | \$141,308.34 |

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| | Fill in this inf | formation to ide | ntify your case: | Dogument | Page 17 | of 41 |
|---|---------------------------------|--|---------------------------|-----------|---------|----------|
| Γ | Debtor 1 | Leteisha | Fastina | Jacobs | | |
| | | First Name | Middle Name | Last Name | | Į. |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | 1 |
| | _ | | | | | |
| | United States B | | the: Northern District of | Georgia | | \ |
| | Case number | 17-61608 | | | | |
| L | (If known) | <u>, </u> | | | | _ |

Official Form 106C

Schedule C: The Property You Claim as Exempt

04/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

| | emptions are you claiming? | | your spouse is filing with you. U.S.C. § 522(b)(3) | |
|---------------------------|--|--------------------------------------|--|------------------------------------|
| | ning federal exemptions. 11 U | | • ,,,,, | |
| or any propert | y you list on Schedule A/B t | hat you claim as exem | pt, fill in the information below. | |
| | n of the property and line on nat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption. | |
| Brief description: | 2458 Wild Springs C | \$ 125,800.00 | 0 s 2/5(00) | |
| ine from Schedule A/B: | 1.1 | | ☐ 100% of fair market value, up to any applicable statutory limit | OLGA 44-13-100# |
| Brief Jescription: | 2011 Int'l Prostar | \$ <u>7,000.00</u> | 🗆 s <u>1600</u> | |
| ine from Schedule A/B: | 31 | | ☐ 100% of fair market value, up to any applicable statutory limit | OCGA44-13-100) |
| Brief description: | 2001 Lincoln Naviga | \$ <u>2,500.00</u> | 0:2500 | |
| | | | ☐ 100% of fair market value, up to any applicable statutory limit | OCAA44-13-100 H |

Debtor 1

Case 17-61608-crm | Doc 15 | Filed 07/10/17 | Entered 07/12/17 11:10:53 | Leteisha | First Name | Last **Desc Main**

Additional Page

| Brief description of the property and line on Schedule A/B that lists this property | | | nt value of the n you own | Amount of the exemption you claim | Specific laws that allow exemption | |
|---|--------------------------|--------------|------------------------------|--|------------------------------------|--|
| | | | he value from ule A/B | Check only one box for each exemption | | |
| Brief description: | 2001 Saab 9-3 | \$ | 1,500.00 | 0s/500 | | |
| Line from Schedule A/B: | 3.3 | | | 100% of fair market value, up to any applicable statutory limit | OCAR 44-13-100 | |
| Brief description: Line from Schedule A/B: | 2001 Int'l Box Truck 3.4 | \$ | 2,000.00 | \$ 1000 of fair market value, up to any applicable statutory limit | OCGA 44-13-100 | |
| Brief description: | Household goods | \$ | 1,500.00 | 0 s 1500 | | |
| Line from Schedule A/B: | 6 | | | ☐ 100% of fair market value, up to any applicable statutory limit | OCGA 44-13-100 | |
| Brief description: | Electronics | \$ | 250.00 | 0 s 250 | | |
| Line from Schedule A/B: | 7 | · Mand · · · | | ☐ 100% of fair market value, up to any applicable statutory limit | OCQA 44-13-100A | |
| Brief description: | Clothing | \$ | 50.00 | 0 \$ <u>50.</u> | | |
| ine from Schedule A/B: | 11 | | | ☐ 100% of fair market value, up to any applicable statutory limit | OLGA 44-13-100 F. | |
| Brief description: | Jewelry | \$ <u></u> | 20.00 | us <u>20.</u> | | |
| ine from Schedule A/B: | 12 | | | ☐ 100% of fair market value, up to any applicable statutory limit | GC4A44-13-100A | |
| 3rief description: | Checking-Delta CU | \$ | 100.00 | □s <u>/00.</u> | | |
| ine from Schedule A/B: | <u>17.1</u> | | | ☐ 100% of fair market value, up to any applicable statutory limit | OCAH 44-13-100H | |
| Brief lescription: | Checking-Chase | \$ | 573.00 | us <u>573.</u> | J | |
| Line from Schedule A/B: | 17.2 | | | ☐ 100% of fair market value, up to any applicable statutory limit | CKGA 44-13-100# | |
| Brief lescription: | Savings-Delta CU | \$ | 15.00 | □\$ <u>/5.</u> | 💆 | |
| ine from Schedule A/B: | 17.3 | | | ☐ 100% of fair market value, up to any applicable statutory limit | OLGA 44-13-100# | |
| Brief lescription: | Savings-Chase | \$ | 0.34 | 0 \$ 6.34 | | |
| ine from Schedule A/B: | 17.4 | | | ☐ 100% of fair market value, up to any applicable statutory limit | OLGA 44-13-100 # 6 | |
| Brief description: | | \$ | | 3 \$ | | |
| Line from Schedule A/B: | | | | ☐ 100% of fair market value, up to any applicable statutory limit | · | |
| Brief description: | | \$ | · · · · · | □ \$ <u></u> | | |
| Line from Schedule A/B: | <u> </u> | | | 100% of fair market value, up to any applicable statutory limit | | |

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| | | Do | ocument Pa | ge 19 of 41 | | |
|--|---|--|--|---|---------------------------------|---------|
| Fill in this inf | ormation to ident | tify your case | | | | |
| Debtor 1 | Leteisha | Fastina | Jacobs | | | |
| Doors, , | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Eirat Nama | Middle Nome | Loot Name | | • | |
| (Spouse, if filing) | rirst Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the: | NORTHERN D | ISTRICT OF GEOF | RGIA | | - |
| Case number (if known) | 17-61608 | | ·· | | Check if this is amended filing | |
| Official Form | 106D | | | | | |
| Schedule D: | Creditors Wh | o <u>Ha</u> ve Cla | ims Secured | by Property | _ | 12/15 |
| correct informatio On the top of any a 1. Do any credit No. Che Yes. Fill Part 1: Lis 2. List all secure claim, list the cereditor has a | n. If more space is readditional pages, writers have claims secured this box and submitional of the information that Secured Claims. If a creditor separately for particular claim, list the ible, list the claims in a | needed, copy the ite your name and ured by your protest this form to the control below. ims or has more than a each claim. If male other creditors | Additional Page, fill dicase number (if kroperty? count with your other some secured one secured one than one in Part 2. As | ogether, both are equall it out, number the entrinown). chedules. You have noth Column A Amount of claim. Do not deduct the value of collateral. | es, and attach it to thi | s form. |
| 2.1 | | | property that | 10 | 大·山安州 安. [1] | |
| Bank of America | 1 | secures the | | \$101,000.00 | \$125,800.00 | |
| Creditor's name PO Box 31785 Number Street | | — 2458 Wild \$ — | springs Ct, | | | |
| | | As of the dat | e you file, the claim | is: Check all that apply. | | |
| Tampa | FL 33631 | — ∏ Continge — ∏ Unliquida | | | | |
| City | State ZIP Code | Disputed | | | | |
| _ | ebtor 2 only the debtors and anoth | An agree Statutory Judgmen | n. Check all that app ment you made (such lien (such as tax lien It lien from a lawsuit cluding a right to offse | as mortgage or secured , mechanic's lien) | çar loan) | |
| Check if this c | | | | | | |
| Date debt was inc | urred 2009 | Last 4 digits | of account number | | | |
| | | | | | | |

Add the dollar value of your entries in Column A on this page. Write that number here:

\$101,000.00

If this is the last page of your form, add the dollar value totals from all pages. Write that number here:

\$101,000.00

| Debtor | 1 <u>Leteisha Fastina Jacobs</u> | | | Case number (if known)17-61608 | |
|----------------------------------|---|-----------------------------|-----------------------------------|---|-----------------|
| Part | 2: List Others to Be Notifi | ed for a | Debt That Yo | u Already Listed | |
| example then list list the | le, if a collection agency is trying to at the collection agency here. Simila | collect fro irly, if you | m you for a deb have more than | ruptcy for a debt that you already listed in Part 1. For t you owe to someone else, list the creditor in Part 1, and one creditor for any of the debts that you listed in Part 1, ns to be notified for any debts in Part 1, do not fill out or | , |
| 1 | Carrington Mortgage Name PO Box 5001 Number Street | | | On which line in Part 1 did you enter the creditor? Last 4 digits of account number | <u>2.1</u> _ |
| | Westfield City | IN State | 46074 ZIP Code | | |
| 2 | Phelan Hallinan Diamond & Jor Name 11675 Great Oaks Way Number Street Suite 375 | nes | | On which line in Part 1 did you enter the creditor? Last 4 digits of account number | 2.1 |
| | Alpharetta City | GA State | 30022 ZIP Code | _ _ | |

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| Fill in this inf | ormation to i | dentify your case | | |
|---------------------|------------------------|---------------------------------------|-----------------|-----|
| Debtor 1 | Leteisha First Name | Fastina Middle Name | Jacobs | |
| Debtor 2 | riisi wame | Middle Name | Last Name | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States Ba | nkruptcy Court fo | or the: NORTHERN D | ISTRICT OF GEOR | GIA |
| Case number | 17-61608 | | | |
| (if known) | | · · · · · · · · · · · · · · · · · · · | | |
| Official Form | 106E/E | - · · · · · · · · · · · · | | |

Yes.

Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Hold Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

List All of Your PRIORITY Unsecured Claims

| 1. | Do any creditors have priority unsecured claims against you? |
|----|--|
| | No. Go to Part 2. |

List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If more space is needed for priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instru

| ruction booklet. | | |
|------------------|-----------------|-----------------------|
| Total claim | Priority amount | Nonpriority amount |

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| Debtor 1 Leteisha Fastina Jacobs | Case number (if known) 17-61608 |
|---|--|
| Part 2: List All of Your NONPRIORIT | Y Unsecured Claims |
| Yes 4. List all of your nonpriority unsecured claims If a creditor has more than one nonpriority unsetype of claim it is. Do not list claims already inc | I claims against you? Submit this form to the court with your other schedules. In the alphabetical order of the creditor who holds each claim. cured claim, list the creditor separately for each claim. For each claim listed, identify what luded in Part 1. If more than one creditor holds a particular claim, list the other creditors in unsecured claims, fill out the Continuation Page of Part 2. |
| Capital One Nonpriority Creditor's Name PO Box 30285 Number Street Salt Lake City UT 84130 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | When was the debt incurred? 08/05/2014 As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Disputed Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card |
| Citibank/Best Buy Nonpriority Creditor's Name PO Box 6500 Number Street Sioux Falls SD 57117 City State ZIP Code Who incurred the debt? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset? No Yes | ## Student loans Disputed Disputed Disputed Disputed Disputed Disputed Disputed Disputed Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Credit Card Credit Card \$1,074.00 \$1,074.00 \$1,074 |

| Debtor 1 Leteisha Fastina Jacobs | Case number (if known)17-61608 | |
|--|--|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the previous page. | m sequentially from the | Total claim |
| 4.3 | | \$106.00 |
| Collection Service of Athens | Lást 4 digits of account number | |
| Nonpriority Creditor's Name 110 Newton Bridge Rd. | When was the debt incurred? | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| Suite A | _ ☐ Contingent ☐ Unliquidated | |
| | Disputed | |
| Athens GA 30607 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Medical | |
| is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| L | | |
| 4.4 | | \$1,286.00 |
| Credit One | Last 4 digits of account number | |
| Nonpriority Creditor's Name PO Box 60500 | When was the debt incurred? 04/28/2015 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | []. Contingent Unliquidated | |
| | ─ | |
| City of Industry CA 91716 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| is the claim subject to offset? | | |
| ☑ No □ Yes | · | |
| F | | |
| 4.5 | | \$517,00 |
| Delta Community Credit Union | Last 4 digits of account number | |
| Nonpriority Creditor's Name 1025 Virginia Ave. | When was the debt incurred? 03/07/2012 | |
| Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ | |
| Atlanta DA 20254 | ─ ☐ Disputed | |
| Atlanta GA 30354 City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. | Student loans | |
| Debtor 1 only Debtor 2 only | Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |

| Debtor 1 Leteisha Fastina Jacobs | Case number (if known) 17-61608 | |
|---|---|-------------|
| Part 2: Your NONPRIORITY Unsecu | red Claims Continuation Page | |
| After listing any entries on this page, number the | m sequentially from the | |
| previous page. | | Total claim |
| 4.6 | | \$1,081.00 |
| Macy's | Last 4 digits of account number | |
| Nonpriority Creditor's Name PO Box 8218 | When was the debt incurred? 04/14/2012 | |
| Number Street | As of the date you file, the claim is: Check all that apply. — Contingent | |
| | Unliquidated | |
| Mason OH 45040 | Disputed | |
| City State ZIP Code | Type of NONPRIORITY unsecured claim: | |
| Who incurred the debt? Check one. ☐ Debtor 1 only | Student loans Obligation arising out of a consistion agreement of diverse | |
| Debtor 2 only | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | |
| Debtor 1 and Debtor 2 only At least one of the debtors and another | Debts to pension or profit-sharing plans, and other similar debts | |
| Check if this claim is for a community debt | ✓ Other. Specify Credit Card | |
| Is the claim subject to offset? | | |
| ☑ Ño □ Yes | | |
| | | |
| 4.7 | | \$534.00 |
| Synchrony Bank/JC Penney Nonpriority Creditor's Name | Last 4 digits of account number | |
| P.O. Box 105972 | When was the debt incurred? 11/27/2015 | |
| Number Street | As of the date you file, the claim is: Check all that apply. — Contingent | |
| | Unliquidated | |
| Atlanta GA 30342 | Disputed | |
| City State ZIP Code Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Credit Card | |
| Is the claim subject to offset? | | |
| ☑ No □ Yes | | |
| | | |
| 4.8 | | \$1,250.00 |
| T-Mobile Nonpriority Creditor's Name | Last 4 digits of account number When was the debt incurred? | |
| PO Box 37380 Number Street | As of the date you file, the claim is: Check all that apply. | |
| | _ Contingent | |
| | Unliquidated Disputed | |
| Albuquerque NM 87176 | _ _ | |
| City Stätë ZIP Cöde Who incurred the debt? Check one. | Type of NONPRIORITY unsecured claim: | |
| Debtor 1 only | Student loans Obligations arising out of a separation agreement or divorce | |
| Debtor 2 only Debtor 1 and Debtor 2 only | that you did not report as priority claims | |
| At least one of the debtors and another | ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify | |
| Check if this claim is for a community debt | Cellular Service | |
| Is the claim subject to offset? | | |
| Ø No □ Yes | | |

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| Debtor 1 | Leteish | a Fastina Jacobs | Case number (if known) 17-61608 | | | | |
|-------------|--------------|--|---------------------------------|---------------|--|--|--|
| Part 4: | Add t | he Amounts for Each Type of Unsecured Claim | | | | | |
| | | ts of certain types of unsecured claims. This information is Add the amounts for each type of unsecured claim. | for statistical reporting pu | urposes only. | | | |
| | | | Total | l claim | | | |
| otal claims | 6a. | Domestic support obligations | 6a. | \$0.00 | | | |
| | 6b. | Taxes and certain other debts you owe the government | 6b | \$0.00 | | | |
| | 6c. | Claims for death or personal injury while you were intoxical | ated 6c. | \$0.00 | | | |
| | 6d. | Other. Add all other priority unsecured claims. Write that am | ount here. 6d. + | \$0.00 | | | |
| | 6 e . | Total. Add lines 6a through 6d. | 6d. | \$0.00 | | | |
| | | | Total | l claim | | | |
| otal claims | 6f. | Student loans | 6f. | \$0.00 | | | |

6g.

6j.

\$0.00

\$0.00

\$9,377.00

\$9,377.00

6g. Obligations arising out of a separation agreement or divorce

6h. Debts to pension or profit-sharing plans, and other similar

Other. Add all other nonpriority unsecured claims. Write that amount here.

that you did not report as priority claims

6j. Total. Add lines 6f through 6j.

debts

from Part 2

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| Debtor 1 | Leteisha | Fastina | <u>Jacobs</u> | |
|--------------------|-------------|--|---------------------|--------------------|
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| Spouse, if filing) | First Mains | THE RESIDENCE OF THE PARTY OF T | | |
| Spouse, ii iiirig) | rest Name | Middle Name | Last Name | |
| · · · · · | | | DISTRICT OF GEORGIA | |
| · · · · · | | | | ☐ Check if this is |

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filling together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page, On the top of any additional pages, write your name and case number (if known).

1. Do you have any executory contracts or unexpired leases?

No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form. Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).

List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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| F | ill in this info | ormation to ider | ntify your case | | | | |
|-------------------|---|---|--|---|--|---------------------------------------|-------|
| D | ebtor 1 | Leteisha First Name | Fastina Middle Name | Jacobs Last Name | _ | | |
| | ebtor 2 Spouse, if filing) | First Name | Middle Name | Last Name | _ | | |
| Ū | Inited States Bar | kruptcy Court for the | : <u>NORTHERN D</u> | ISTRICT OF GEORGIA | <u></u> | | |
| 7. | ase number f known) | 17-61608 | | | | Check if this is an amended filing | |
| | ··· <u>-</u> | | | | | | |
| O1 | <u>fficial Form</u> | <u>106H</u> | | | | | |
| Sc | chedule H: | Your Codeb | tors | | | | 12/15 |
| two nee pag | o married peopleded, copy the Age. On the top o | e are filing togethe Additional Page, fill of any Additional Pa | r, both are equally it out, and numbe ages, write your r | r any debts you may have. y responsible for supplying er the entries in the boxes of name and case number (if ki | correct information. If mention is the left. Attach the Adnown). Answer every qu | ore space is ditional Page to this | |
| 1. | Do you have a ☑ No ☐ Yes | any codebtors? (| If you are filing a jo | int case, do not list either spo | ouse as a codebtor.) | | |
| 2. | include Arizon | • • | | inity property state or territo i, New Mexico, Puerto Rico, T | | | |

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use

Column 1: Your codebtor

□ No □ Yes

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

Column 2: The creditor to whom you owe the debt

Check all schedules that apply:

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| | | | Doc | ument i c | igc z | -0 0 | 41 | | | |
|-------------------------|---|---|--|--|---------------------|-----------------|------------------------------|--|-----------------|-----|
| F | ill in this informa | tion to identify | your case: | | | | | | | |
| | _ | .eteisha | Fastina | Jacobs | | | | | | |
| | | irst Name | Middle Name | Last Name | | | Che | ck if this is: | | |
| | Debtor 2 (Spouse, if filing) F | irst Name | Middle Name | Last Name | | | □ | An amended filing | | |
| | United States Bankrup | tcy Court for the: | NORTHERN | DISTRICT OF G | EOR | SIA | | A supplement showing pos | • | |
| | | 7-61608 | · | | _ | | | chapter 13 income as of th | e following dat | .e: |
| | (if known) | | | | | | | MM / DD / YYYY | | |
| | fficial Form 106 | • | | | | | | | | |
| S | chedule I: You | Income | | | | | | | 12/1 | 5 |
| res inc ab you | ponsible for supplyin lude information abou out your spouse. If m ur name and case num | g correct informa it your spouse. I ore space is need | ition. If you are f you are separ led, attach a se Answer every q | married and not ated and your spo parate sheet to th | filing j ouse is | ointly not f | , and your : iling with y | I Debtor 2), both are equal spouse is living with you, ou, do not include informany additional pages, writ | ation | |
| 1. | Fill in your employn | nent | · · · · · · · · · · · · · · · · · · · | Dahaad | | | | 5 -14-4 | | - |
| | If you have more that | | | Debtor 1 | | | | Debtor 2 or non-filing s | pouse | |
| | job, attach a separate with information abou | | ment status | ☑ Employed ☐ Not employe | ed | | | ☐ Employed ☐ Not employed | | |
| | additional employers | Occup | ation | Driver | | | | | | |
| | Include part-time, sec or self-employed wor | asonal, | er's name | AmeriCold Log | jistic | s, LL(| <u> </u> | | | _ |
| | Occupation may incli | -mpio | er's address | 10 Glenjake Pl | cwy. | | | | | |
| | student or homemake applies. | er, if it | | Number Street | | | | Number Street | | |
| | • | | | Suite 600 | | | | - | | _ |
| | | | | Atlanta | | GA | 30328 | | | |
| | | | | City | - | State | Zip Code | City | itate Zip Code | _ |
| | | How Io | ng employed ti | nere? <u>6 years</u> | | | _ | · | | |
| | Civo Do | ails About Mo | nthis Incom | • | | | | | | |
| | | <u></u> | | | | | | | | — |
| | timate monthly incom n-filing spouse unless y | | ou file this form | n, it you have noth | ing to | report | for any line | , write \$0 in the space. Incl | ude your | |
| - | où or your non-filing sp i need more space, atta | | | er, combine the info | omatio | on for | all employe | rs for that person on the line | es below. If | |
| | | | | | | For D | ebtor 1 | For Debtor 2 or non-filing spouse | | |
| 2. | List monthly gross payroll deductions). would be. | | | | 2. | 3 | 4,672.89 | | | |
| 3. | Estimate and list me | onthly overtime p | ay. | | 3. 👍 | | \$0.00 | | | |
| 4. | Calculate gross inc | ome. Add line 2 + | line 3. | | 4. | | 4,672.89 | | | |

Official Form 106l Schedule I: Your Income page 1

| Debt | or 1 Leteisha Fastina Jacobs | | Case nun | nber (if know | n) <u>17-</u> | 61608 |
|------------|---|--------------|------------------------|---------------|---------------|------------------------------------|
| | | | For Debtor 1 | For Debto | | _ |
| | Copy line 4 here | 4. | \$4,672.89 | | | |
| 5 . | List all payroll deductions: | | | | | |
| | 5a. Tax, Medicare, and Social Security deductions | 5a. | <u>\$723.51</u> | | | |
| | 5b. Mandatory contributions for retirement plans | 5b. | \$0.00 | | | |
| | 5c. Voluntary contributions for retirement plans | 5c. | \$0.00 | | | |
| | 5d. Required repayments of retirement fund loans | 5d. | \$0.00 | | | |
| | 5e. Insurance | 5e. | \$194.38 | | | |
| | 5f. Domestic support obligations | 5f. | \$0.00 | | _ | • |
| | 5g. Union dues | 5g. | <u>\$54.33</u> | - | | |
| | 5h. Other deductions. Specify: Flexible Spending | 5h.+ | \$216.67 | | | |
| | Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. | 6. | \$1,188.89 | | | |
| 7 . | Calculate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$3,484.00 | | <u> </u> | |
| 8. | List all other income regularly received: | _ | | | | |
| • | 8a. Net income from rental property and from operating a business, profession, or farm | 8 a . | \$0,00 | | | |
| | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | | | | | |
| | 8b. Interest and dividends | 8b. | \$0.00 | | | |
| | 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8c. | \$0.00 | | | |
| | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | | | | |
| | 8d. Unemployment compensation | 8d. | \$0.00 | | | |
| | 8e. Social Security | 8e. | \$0.00 | | | |
| | 8f. Other government assistance that you regularly receive include cash assistance and the value (if known) or any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | |
| | Specify: | 8f. | \$0.00 | | | |
| | 8g. Pension or retirement income | 8g. | \$0.00 | | | |
| | 8h. Other monthly income. | | | | | |
| | Specify: | 8h. | \$0.00 | | | |
| 9. | Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h. | 9. | \$0.00 | | | · |
| 10. | Calculate monthly income. Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. | \$3,484.00 | + | | = \$3,484.00 |
| 11. | State all other regular contributions to the expenses that you list in S | | | | | |
| | Include contributions from an unmarried partner, members of your houselfriends or relatives. | iold, y | our dependents, you | r roommates | s, and oth | ner |
| | Do not include any amounts already included in lines 2-10 or amounts that | it are r | not available to pay e | expenses list | ed in Sc | hedule J. |
| | Specify: | | | | 11. | + \$0.00 |
| 12. | Add the amount in the last column of line 10 to the amount in line 11, income. Write that amount on the Summary of Your Assets and Liabilities if it applies. | | | | 12. | \$3,484.00 Combined monthly income |
| 13. | Do you expect an increase or decrease within the year after you file t | his fo | rm? | . <u> </u> | | |
| | No. None. | | | | | |
| | Yes. Explain: | | | | | ı, |

Official Form 106l Schedule I: Your Income page 2

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| | | | Duce | iment | rage 30 01 41 | | | |
|----|--|---|--|----------------|--------------------|-------------|---|-------------------|
| F | ill in this inforn | nation to ide | ntify your case: | | | Öbook if | Aladin Tair | |
| | Debtor 1 | Leteisha First Name | Fastina Middle Name | Jaco Last N | | . — | tnis is: amended filing upplement showing | postpetition |
| | Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last N | ame | | pter 13 expenses a owing date: | s of the |
| | United States Bank | ruptcy Court for t | the: NORTHERN D | ISTRICT O | F GEORGIA | MM | /DD/YYYY == | |
| | Case number (if known) | 17-61608 | | | |] } | 75571111 | |
| 0 | fficial Form 10 |)6J | | | | 1 | | |
| S | chedule J: Yo | our Expens | ses | | | | | 12/15 |
| na | errect information. I | f more space is er (if known). A | sible. If two married needed, attach anot inswer every questio | her sheet to | | | | |
| F | Part 1: Descr | ibe Your Hou | sehold | | | | | |
| 1. | Is this a joint cas | e? | | | | | | |
| Ż. | ☐ No ☐ Ye Do you have dep | Debtor 2 live in a s. Debtor 2 mus endents? | a separate household t file Official Form 106 ☐ No ☑ Yes. Fill out this i | J-2, Expense | Dependent's relati | onship to | otor 2. Dependent's | Does dependent |
| | Do not list Debtor Debtor 2. | 1 and | for each depende | | Debtor 1 or Debtor | | age | live with you? |
| | Do not state the d | ependents' | | | <u>Daughter</u> | | 16 | Yes |
| | names. | • | | | Son | | 2 | □ No · 1√1 Yes |
| | | | | | | | | □ No |
| | | | | | | | | '∐ Yes □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No □ Yes |
| 3. | Do your expense expenses of peo yourself and you | ple other than | ✓ No ☐ Yes | | | | | res |
| F | Part 2: Estima | ate Your Ong | joing Monthly Ex | penses | | | | |
| to | | of a date after t | ankruptcy filing date the bankruptcy is file e. | | | | | |
| | | | ash government assi on Schedule I: Your | | | | Your expens | es |
| 4. | | | xpenses for your resi | | | | 4 | \$901.00 |
| | If not included in | | | | | | | |
| | 4a. Real estate t | axes | | | | | 4a. | |
| | 4b. Property, hor | neowner's, or rer | nter's insurance | | | | 4b | |
| | 4c. Home mainte | enance, repair, ar | nd upkeep expenses | | | | 4c | |
| | 4d. Homeowner's | association or o | condominium dues | | | | 4d | |

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| Deb | tor 1 Leteisha Fastina Jacobs | Case number (if known) | 17-61608 |
|-----|---|------------------------|--|
| | | Your e | expenses |
| 5. | Additional mortgage payments for your residence, such as home equity loans | 5 | |
| 6. | Utilities: | | |
| | 6a. Electricity, heat, natural gas | 6a | \$200.00 |
| | 6b. Water, sewer, garbage collection | 6b | \$130.00 |
| | 6c. Telephone, cell phone, Internet, satellite, and cable services | 6c | \$238.00 |
| | 6d. Other. Specify: | 6d. | <u></u> |
| 7. | Food and housekeeping supplies | 7 | \$550.00 |
| 8. | Childcare and children's education costs | 8 | \$520.00 |
| 9. | Clothing, laundry, and dry cleaning | 9 | \$100.00 |
| 10. | Personal care products and services | 10. | \$50.00 |
| 11. | Medical and dental expenses | 11. | \$75.00 |
| 12. | Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. | 12. | \$250.00 |
| 13. | Entertainment, clubs, recreation, newspapers, magazines, and books | 13 | |
| 14. | Charitable contributions and religious donations | 14 | , , — , — , — , — , — , — , — , — , — , |
| 15. | Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. | | |
| | 15a. Life insurance | 1 5a | |
| | 15b. Health insurance | 15b | |
| | 15c. Vehicle insurance | 15c | \$70.00 |
| | 15d. Other insurance. Specify: | 15d. | |
| 16. | Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: | 16 | |
| 17. | Installment or lease payments: | | |
| | 17a. Car payments for Vehicle 1 | 17a. | |
| | 17b. Car payments for Vehicle 2 | 17b | · |
| | 17c. Other. Specify: | 17c | |
| | 17d. Other. Specify: | | |
| 18. | Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). | 18 | |
| 19. | Other payments you make to support others who do not live with you. Specify: | 19. | |

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| Deb | tor 1 | Leteisha Fastina Jacobs | Case number (if known) | 17-61608 |
|-----|-------|---|------------------------|---------------------------------------|
| 20. | | real property expenses not included in lines 4 or 5 of this form or on dule I: Your Income. | | |
| | 20a. | Mortgages on other property | 20a | |
| | 20b. | Real estate taxes | 20b | M-1 |
| | 20c. | Property, homeowner's, or renter's insurance | 20c | |
| | 20d. | Maintenance, repair, and upkeep expenses | 20d | |
| | 20e. | Homeowner's association or condominium dues | 20e | · · · · · · · · · · · · · · · · · · · |
| 21. | Othei | . Specify: | 21. + | |
| 22. | Calcu | late your monthly expenses. | | |
| | 22a. | Add lines 4 through 21. | 22a | \$3,084.00 |
| | 22b. | Copy line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2. | 22b | |
| | 22c. | Add line 22a and 22b. The result is your monthly expenses. | 22c | \$3,084.00 |
| 23. | Calcu | slate your monthly net income. | | |
| | 23a. | Copy line 12 (your combined monthly income) from Schedule I. | 23a | \$3,484.00 |
| | 23b. | Copy your monthly expenses from line 22c above. | 23b. 👊 | \$3,084.00 |
| | 23c. | Subtract your monthly expenses from your monthly income. The result is your monthly net income. | 23c | \$400.00 |
| 24. | Do yo | ou expect an increase or decrease in your expenses within the year after you | file this form? | |
| | | kample, do you expect to finish paying for your car loan within the year or do you e ent to increase or decrease because of a modification to the terms of your mortga | | |
| | | No | | |
| | | res. Explain here: | ••• | - |
| | | None. | | |
| | | | | |

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| | ormation to ide | entify your case: | |
|---------------------------------|------------------------|------------------------|---------------------|
| Debtor 1 | Leteisha First Name | Fastina Middle Name | Jacobs Last Name |
| Debtor 2 (Spouse, if filing) | | Middle Name | Last Name |
| United States Bar | nkruptcy Court for t | he: NORTHERN DIS | TRICT OF GEORGIA |
| Case number (if known) | 17-61608 | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

| P | art 1: 5 Summarize Your Assets | |
|----|--|--------------------------------------|
| | | Your assets Value of what you own |
| | Schedule A/B: Property (Official Form 106A/B) | |
| | 1a. Copy line 55, Total real estate, from Schedule A/B | \$125,800.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$15,508.34 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$141,308.34 |
| P | art 2: Summarize Your Liabilities | |
| | | Your liabilities Amount you owe |
| ļ. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$101,000.00 |
| • | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | + \$9,377.00 |
| | Your total liabilities | \$110,377.00 |
| Ρ | art 3: Summarize Your Income and Expenses | |
| ١. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$3,484.00 |
| | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$3,084.00 |

| Det | otor 1 | Leteisha Fastina Jacobs Case | e number (if known) | 17-61608 |
|-----|--------|--|-----------------------|------------------------------|
| P | art 4 | Answer These Questions for Administrative and Statistical I | Records | |
| 6. | Are | you filing for bankruptcy under Chapters 7, 11, or 13? | | |
| | 回 | No. You have nothing to report on this part of the form. Check this box and submit Yes | this form to the coul | t with your other schedules. |
| 7. | Wh | at kind of debt do you have? | | |
| | ☑ | Your debts are primarily consumer debts. Consumer debts are those "incurred family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical | • | |
| | | Your debts are not primarily consumer debts. You have nothing to report on this this form to the court with your other schedules. | • | • |
| В. | | m the Statement of Your Current Monthly Income: Copy your total current monthly cial Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. | y income from | \$4,672.89 |
| 9. | Cop | by the following special categories of claims from Part 4, line 6 of Schedule E/F: | | |
| | | | Total claim | |
| | Fro | m Part 4 on Schedule E/F, copy the following: | | |
| | 9a. | Domestic support obligations. (Copy line 6a.) | - | \$0.00 |
| | 9b, | Taxes and certain other debts you owe the government. (Copy line 6b.) | | \$0.00 |
| | 9c. | Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | | \$0.00_ |
| | 9d. | Student loans. (Copy line 6f.) | - | \$0.00 |
| | 9e. | Obligations arising out of a separation agreement or divorce that you did not report priority claims. (Copy line 6g.) | as | \$0.00 |
| | 9f. | Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | + | \$0.00 |
| | 9g. | Total. Add lines 9a through 9f. | | \$0.00 |

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| | | Do | cument Page | 935 of 41 | |
|--------------------------------|------------------------|--|-------------------------|---|------|
| Fill in this in | formation to i | dentify your case | | | |
| Debtor 1 | Leteisha First Name | Fastina Middle Name | Jacobs Last Name | | |
| Debtor 2 (Spouse, if filing |) First Name | Middle Name | Last Name | | |
| United States Ba | ankruptcy Court fo | r the: NORTHERN D | ISTRICT OF GEORGI | IA | |
| Case number (if known) | 17-61608 | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, | | Check if this is an amended filing | |
| Official Forn | n 106Dec | | | - | |
| Declaration | About an I | ndividual Debi | tor's Schedules | 1 | 2/15 |
| | risonment for up | to 20 years, or both. | 18 U.S.C. §§ 152, 1341, | 1519, and 3571. | |
| 21 | gn Below | | | <u> </u> | |
| | or agree to pay s | someone who is NOT | an attorney to help you | r fill out bankrüptcy forms? | |
| □ No ☑ Yes. N | Name of person | Charles M. Lange <u>yi</u> | n, Jr. | Attach Bankruptcy Petition Preparer's Notice Declaration, and Signature (Official Form 11 | |
| | | | | | |

Date

MM / DD / YYYY

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| Fill in this inf | ormation to iden | tify the ca | sē: | A Property of the Control of the Con |
|---------------------------------|------------------------|------------------------|--------------------|--|
| Debtor 1 | Leteisha First Name | Fastina Middle Name | Jacobs Last Nam | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Nam | е |
| United States Bar | nkruptcy Court for the | NORTHER | N DISTRICT OF | F GEORGIA |
| Case number (if known) | 17-61608 | | Chapter13 | |

Official Form 119

Bankruptcy Petition Preparer's Notice, Declaration, and Signature

12/15

Bankruptcy petition preparers as defined in 11 U.S.C. § 110 must fill out this form every time they help prepare documents that are filed in the case. If more than one bankruptcy petition preparer helps with the documents, each must sign in Part 2. A bankruptcy petition preparer who does not comply with the provisions of title 11 of the United States Code and the Federal Rules of Bankruptcy Procedure may be fined, imprisoned, or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

Part 1:

Notice to Debtor

Bankruptcy petition preparers must give the debtor a copy of this form and have the debtor sign it before they prepare any documents for filing or accept any compensation. A signed copy of this form must be filed with any document prepared.

Bankruptcy petition preparers are not attorneys and may not practice law or give you legal advice, including the following:

- whether to file a petition under the Bankruptcy Code (11 U.S.C. § 101 et seq.);
- whether filing a case under chapter 7, 11, 12, or 13 is appropriate;
- whether your debts will be eliminated or discharged in a case under the Bankruptcy Code;
- whether you will be able to keep your home, car, or other property after filing a case under the Bankruptcy Code;
- what tax consequences may arise because a case is filed under the Bankruptcy Code;
- whether any tax claims may be discharged;
- whether you may or should promise to repay debts to a creditor or enter into a reaffirmation agreement;
- how to characterize the nature of your interests in property or your debts; or
- what procedures and rights apply in a bankruptcy case.

| | The bankruptcy petition preparer | Charles M. Langevin, Jr. | has notified me of |
|-----|---|--|--------------------|
| | any maximum allowable fee before prepar | ing any document for filing or accepting any fee. | |
| X . | Leteisha Fastina Jacobs, Debtor 1, acknowledgi | Date 07/06/2017 mg receipt of this notice MM / DD / YYYY | |
| X | Signature of Debtor 2, acknowledging receipt of | this notice Date MM / DD / YYYY | |

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| ebtor 1 Leteisha Fastina Jacobs | _ | | Cas | e nu | mber (if known) <u>17-61608</u> |
|---|------------|--|-------------------------------------|--------|---|
| Part 2: Declaration and Signa | ature | of the Bankruptcy P | etition Prepa | rer | Supplemental |
| nder penalty of perjury, I declare that: | | | | | |
| I am a bankruptcy petition preparer or th | ne offi | cer, principal, responsible p | erson, or partner | of a | bankruptcy petition preparer; |
| For my firm prepared the documents list Preparer as required by 11 U.S.C. §§ 1 | | | copy of them and | the | Notice to Debtor by Bankruptcy Petition |
| If rules or guidelines are established acc | | | ting a maximum t | ee f | or services that bankruptcy petition |
| preparers may charge, I or my firm notifi | | | - | | |
| accepting any fee from the debtor. | | | | | |
| Charles M. Langevin, Jr. Printed name | Titla | if any | Firm name, if i | t an | nlice |
| 5060 Memorial Drive | TILIC | ii any | i just u ğ ıd e, ii i | ir ábl | hiiea |
| Number Street | | | | | |
| | | | | | |
| - | A tate | 30083 ZIP Code | (678) 490-58 Contact phone | | |
| or my firm prepared the documents che neck: | cked | l below and the completed | declaration is n | nade | e a part of each document that I |
| heck all that apply.) | | | | | |
| Voluntary Petition (Form 101) | √ | Schedule I (Form 106I) | | | Chapter 11 Statement of Your Current Monthly |
| Statement About Your Social Security | V | Schedule J (Form 106J) | | | Income (Form 122B) |
| Numbers (Form 121) | | Declaration About an Indiv | vidual Debtor's | | = |
| Summary of Your Assets and Liabilities and Certain Statistical Information | √ | Schedules (Form 106Dec) |) _ | | Income and Calculation of Commitment Period (Form 122C-1) |
| (Form 106Sum) | abla | Statement of Financial Affairs (Form 107) | | | Chapter 13 Calculation of Your Disposable |
| Schedule A/B (Form 106A/B) | | Statement of Intention for Under Chapter 7 (Form 10 | | | Income (Form 122C-2) |
| Schedule C (Form 106C) | _ | Chapter 7 Statement of Yo | f Your Current | | Application to Pay Filing Fee in Installments (Form 103A) |
| Schedule D (Form 106D) | Ш | Monthly Income (Form 122 | | | |
| Schedule E/F (Form 106E/F) | | Statement of Exemption fr | | | Application to Have Chapter 7 Filing Fee Waived (Form 103B) |
| Schedule G (Form 106G) | | of Abuse Under § 707(b)(2 (Form 122A-1Supp) | 2) | | A list of names and addresses of all creditors (creditor or mailing matrix) |
| Schedule H (Form 106H) | | Chapter 7 Means Test Cal (Form 122A-2) | culation | V | Other Plan Request for EDO |
| ankruptcy petition preparega motat sign an | d giy | heir Secial Security numb | pers. If more than | one | e bankruptcy petition preparer prepared the |
| cuments to which this decision applies |) he | signature and Social Secur | rity number of eac | h pr | reparer must be provided. 11 U.S.C. § 110. |
| 1/ | <u>//-</u> | 3 | <u>7 1 - 9</u> | 2 | - 3 0 7 0 Date 07/06/2017 |
| Signature of bankruptcy petition prepare responsible person, or partner | er or c | officer, principal, Socia | al Security number | r of | person who signed MM / DD / YYY |
| Charles M. Langevin, Jr. | | | | | |
| Printed name | | | | | |
| | | | _ | | ÷ Date |
| Signature of bankruptcy petition prepare responsible person, or partner | er or o | officer, principal, Socia | al Security numbe | r of | person who signed MM / DD / YYY |
| Printed name | | | | | |

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| | | | | Juliiciii r | age 30 0 | 11 41 | 4.0 | |
|---------------|---|--|---|--|---|--|---|--|
| ·· | ill in this inf | ormation to iden | tify your case: | | All Marie (Tree) | Check as | directed in line | s 17 and 21: |
| I | Debtor 1 | Leteisha First Name | Fastina Middle Name | Jacobs Last Name | | According to Statement: | the calculations re | quired by this |
| | Debtor 2 Spouse, if filing) | First Name | Middle Name | Lást Name | | | ible income is not o 1 U.S.C. § 1325(b) | |
| ι | United States Bar | nkruptcy Court for the: | NORTHERN DI | STRICT OF GEO | RGIA | | ible income is dete 1 U.S.C. § 1325(b) | |
| | Case number if known) | 17-61608 | | | - | , , _ | nmitment period is | • |
| L | | <u></u> | | | | 4. The cor | | o years. |
| <u>0</u> | fficial Form | 122C-1 | | | | Check if t | his is an amended | filing |
| | | Statement of \ tion of Comm | | | come | | | 12/15 |
| ini | formation applie | space is needed, attes. On the top of any | additional pages | write your name | | | | ai |
| 1. | What is your | marital and filing sta | itus? Check one o | nly. | | | | |
| | ⊘ Not marr | ied. Fill out Column A | A, lines 2-11. | | | | | |
| | ☐ Married. | Fill out both Columns | s A and B, lines 2-1 | 1. | | | | |
| 美国教育技术 | bankruptcy c August 31 If in the result 3 | rage monthly income ase: -11 U.S.C.§ 101 the amount of your mo Do not include any inc nat property in one co | l (10A): For examp onthly income varie come amount more | e, if you are filing o d during the 6 mor than once For ex | on Septembe oths, add the ample, if bot | r 15, the 6-mon income for all 6 h spouses own | th period would be months and divide he same rental pro | March 1 through the total by 6 Fill |
| | | | | | | Column A | Column B Debtor 2 or non-filing spous | . |
| 2. | | ages, salary, tips, bo roll deductions). | onuses, overtime, | and commissions | • | \$4,672.89 | . | |
| 3. | Alimony and | maintenance päyme | nts. Do not include | e payments from a | spouse. | \$0.00 | | |
| 4. | expenses of y regular contrib your depender | rom any source white you or your depende outions from an unmar nts, parents, and room of include payments y | nts, including chil ried partner, memb nmates. Do not inc | d support. Include ers of your househ | old, | \$0.00 | | |
| 5. | Net income fr | om operating a busi | ness, profession, | or farm | | | | |
| | Gross receipts | (before all | Debtor 1 \$0.00 | Debtor 2 | - | | | |
| | • | necessary operating | \$0.00 | | Čon: | | | |
| | • | come from a business | s,\$0.00 | | Copy here ⋺ | \$0.00 | u. | |

| Deb | tor 1 | Leteisha Fastina Jacobs | | | | Case number (if I | (nown) <u>17-61608</u> | |
|-----|----------------------|--|---|--|-------------|----------------------|---|---|
| | | | | - | | Column A Debtor 1 | Column B Debtor 2 or non-filing spouse | |
| 6. | Net | income from rental and other r | eal property | | | | | |
| | | | Debtor 1 | Debtor 2 | | | | |
| | | ss receipts (before all uctions) | \$0.00 | | | | | |
| | | inary and necessary operating - enses | \$0.00 | | Сору | | | |
| | | monthly income from rental or er real property | \$0.00 | | here → | \$0.00 | | |
| 7. | Inte | rest, dividends, and royaltles | | | | \$0.00 | | |
| 8. | Une | mployment compensation | | | | \$0.00 | | |
| | | not enter the amount if you conte efit under the Social Security Act | | | | | | |
| | F | For you | | \$0. | <u>00</u> | | | |
| | F | For your spouse | ••••• | | _ | | | |
| 9. | | sion or retirement income. Do a benefit under the Social Secur | | ount received that | | \$0.00 | | |
| | amo or p or in | ome from all other sources not ount. Do not include any benefits ayments received as a victim of a aternational or domestic terrorism arate page and put the total below | received under the war crime, a crime . If necessary, list o | Social Security A against humanity | ct ', | | | |
| | | | | | | | | |
| | | al amounts from separate pages, | | | 4 | | + | |
| 11. | Add | culate your total average month lines 2 through 10 for each colum n add the total for Column A to th | nn. | 3. | | \$4,672,89 | + | \$4,672.89 Total average monthly income |
| 0. | | Determine How to M | againe Vain De | adurations for | - l | _ | | monuny income |
| | art 2 | the state of the s | | • | · | | | |
| 12. | | y your total average monthly in | | | | | Yan da est jarijarijarijarijarijarijarija | \$4,672.89 |
| 13. | Cal | culate the marital adjustment. | | | | | | |
| | $\overline{\square}$ | You are not married. Fill in 0 be | | Sill in O halan. | | | | |
| | | You are married and your spous You are married and your spous Fill in the amount of the income of you or your dependents, such than you or your dependents. Below, specify the basis for excinecessary, list additional adjusti | se is not filing with y listed in line 11, Co as payment of the luding this income a | ou. Jumn B, that was i spouse's tax liabi and the amount of | lity or the | spouse's support | of someone other | |
| | | If this adjustment does not apply | y, enter 0 below. | | | | | |
| | | | | | | | | |
| | | · · · · · · · · · · · · · · · · · · · | | | | | | |
| | | Total | | | | \$0.00 Cop | y here 👈 | \$0.00 |
| 14. | You | r current monthly income. Sut | otract the total in line | e 13 from line 12. | | | | \$4,672.89 |

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| Debtor 1 | | Leteisha Fastina Jacobs Case number (if known) 17-61608 | |
|----------|-------|---|-------------------|
| 15. | Calc | ulate your current monthly income for the year. Follow these steps: | |
| | 15a, | Copy line 14 here | \$4,672.89 |
| | | Multiply line 15a by 12 (the number of months in a year). | X 12 |
| | 15b. | The result is your current monthly income for the year for this part of the form. | \$56,074.68 |
| 16. | Calc | ulate the median family income that applies to you. Follow these steps: | |
| | 16a. | Fill in the state in which you live. Georgia | |
| | 16b. | Fill in the number of people in your household. | |
| | 16c. | Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. | \$62,483.00 |
| 17. | How | do the lines compare? | |
| | 17a. | Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official | |
| | 17b. | Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 12). On line 39 of that form, copy your current monthly income from line 14 above. | |
| | art/3 | | |
| 18. | Copy | your total average monthly income from line 11. | <u>\$4,672.89</u> |
| 19. | that | act the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's ne, copy the amount from line 13. | |
| | 19a. | If the marital adjustment does not apply, fill in 0 on line 19a. | – \$0.00 |
| | 19b. | Subtract line 19a from line 18. | \$4,672.89 |
| 20. | Calc | ulate your current monthly income for the year. Follow these steps: | |
| | 20a. | Copy line 19b | <u>\$4,672.89</u> |
| | | Multiply by 12 (the number of months in a year). | X 12 |
| | 20b. | The result is your current monthly income for the year for this part of the form. | \$56,074.68 |
| | 20c. | Copy the median family income for your state and size of household from line 16c. | \$62,483.00 |
| 21. | How | do the lines compare? | |
| | | Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, <i>The commitment period is 3 years.</i> Go to Part 4. | |
| | | Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, <i>The commitment period is 5 years</i> . Go to Part 4. | |

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| Debtor 1 | Leteisha Fastina Jacobs | Case number (if known) 17-61608 |
|----------|--|--|
| Part 4: | Sign Below | |
| By sign | ning here, under penalty of perjury I declare that the | ne information on this statement and in any attachments is true and correct. |
| X | eisha Fastina Jacobs, Debtor 1 | Signature of Debtor 2 |
| Dat | e 7/6/2017 | Date |
| | MM / DD / YYYY | MM / DD / YYYY |

If you checked 17a, do NOT fill out or file Form 122C-2.

If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.